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APR 30 2009

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CUSTOMER NO.: 24498

Mall Stop: RCE

ATTACHED: - FEE TRANSMITTAL (PTO/SB/17), in duplicate;
RCE (PTO/SB/30), in duplicate;
IDS STATEMENT (PTO/SB/08a), and
LETTER TO USPTO, 2 pages.

Serial No.: 10/541,634

Art Unit: 2629

Examiner: Robert R. Rainey

Docket No.: PF030023

TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 8

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PTO/5B/17 (01/08)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

for FY 2007

☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**810.00**

Complete if Known

Application Number **10/541,634**
Filing Date **April 11, 2006** **APR 30 2009**
First Named Inventor **Khaled Sarayeddine**
Examiner Name **Robert R. Rainey**
Art Unit **2629**
Attorney Docket No. **PF030023**

METHOD OF PAYMENT (check all that apply)

CUSTOMER NUMBER: **24498**☐ Check ☐ Credit card ☐ Money Order☐ None ☐ Other (please identify):☒ Deposit Account: Deposit Account Number **07-0832**Deposit Account Name: **THOMSON LICENSING LLC**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of☒ Credit any overpayments

fee(s) under 37 CFR 1.16 and 1.17

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- or HP = $\frac{\text{Total Claims} - 20}{\text{Extra Claims}} \times \$50 = \$$
HP = highest number of total claims paid for, if greater than 20.

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- or HP = $\frac{\text{Independent Claims} - 3}{\text{Extra Claims}} \times \$200 = 0$
HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): FEE FOR RCE

- \$810.00

Fees Paid (\$)

\$810.00

SUBMITTED BY

Name (Print/Type)	Richard LaPeruta	Registration No. (Attorney/Agent)	51,252	Telephone	(609) 734-6816
Signature	Richard LaPeruta				
					April 30, 2009

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).

FEE TRANSMITTAL
for FY 2007☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 810.00**Complete if Known**

Application Number	10/541,634
Filing Date	April 11, 2006
First Named Inventor	Khaled Sarayeddine
Examiner Name	Robert R. Rainey
Art Unit	2629
Attorney Docket No.	PF030023

METHOD OF PAYMENT (check all that apply)**CUSTOMER NUMBER: 24498**☐ Check ☐ Credit card ☐ Money Order☐ None☐ Other (please identify):☒ Deposit Account: Deposit Account Number **07-0832**

Deposit Account Name:

THOMSON LICENSING LLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	180	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims**Extra Claims****Fee (\$)****Fee Paid (\$)**

- or HP =

x

\$50

= \$

HP = highest number of total claims paid for, if greater than 20.

Independent Claims**Extra Claims****Fee (\$)****Fee Paid (\$)**

- or HP =

x

\$200

= 0

HP = highest number of independent claims paid for, if greater than 3.

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **FEE FOR RCE**

- \$810.00

Fees Paid (\$)**\$810.00****SUBMITTED BY**

Name (Print/Type)	Richard LaPeruta	Registration No. (Attorney/Agent)	51,252	Telephone	(609) 734-6816
Signature	<i>Richard LaPeruta</i>				April 30, 2009

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